



Massachusetts Department of Environmental Protection
MassCleanDiesel: Clean Markets Program

Application Instructions

Application Closing Date: October 31, 2011

Submission Information: Applications should be submitted to Susan Lyon, Diesel Grant Programs Coordinator, MassDEP, One Winter St., 6th Floor, Boston, MA 02108. **Only hardcopy applications will be accepted.**

Application Form Instructions

The application consists of four pages:

- Page 1 (Sections A, B, and C) requests general applicant information.
- Page 2 (Sections D and E) is a vehicle/trailer description worksheet where the applicant is required to describe each vehicle/trailer for which technology is requested. MassDEP highly recommends that this worksheet be filled out jointly by the applicant and a MassDEP approved technology vendor. A separate worksheet must be filled out for each vehicle/trailer for which the applicant is requesting technology (applicants will need to make a blank copy of this worksheet.) There is no limit to the number of technologies that applicants may request.
- Page 3 (Section F) requires applicants to insert the Totals of the project cost columns (Columns 5, 7 and 8) of Section E for each vehicle/trailer into Section F's Register. Applicants applying for more than 20 vehicles/trailers must submit an additional Register page.
- Page 4 is specifically for applicants requesting grant funding for an eTRU.

MassDEP requires specific information on each vehicle/trailer including the: vehicle/trailer unit #, vehicle/trailer identification number (VIN), vehicle license plate or trailer registration number, the vehicle/trailer model year, make (manufacturer) and model, the vehicle's EPA engine family number, the engine model year, make (manufacturer) and model, the engine horsepower rating and the vehicle's gross vehicle weight (not required of trailers). Much of this information can be found on the vehicle tag located on the driver side door and the engine mounted identification plaque or tag.

MassDEP also requires information on the average miles the vehicle is driven or hours the trailer is used per year, the month/year you expect to retire the vehicle/trailer, and the Massachusetts warehouse(s), market(s), or distribution center(s) the vehicle/trailer services or operates at. Only those applicants requesting vehicle technology for their on-road vehicles are required to provide information on the vehicle's operating territory, including other U.S. states and Massachusetts municipalities,

Explanation of Application Fields

Page 1 of Application:

Section A. Applicant Information		
Section	Field Name(s)	Explanation
1.	<i>Name of Company</i>	The truck owner and/or warehouse/market/distribution center that is applying for grant funds. Only trucks/trailers owned by the Applicant can be included in this grant program.
2.-6.	<i>Address 1, Address 2, City/Town, State, Zip Code</i>	The physical location of the company.
7.-11.	<i>Mailing Address 1 (If different), Mailing Address 2, City/Town, State, Zip Code</i>	The mailing address of the company if different from the site address. MassDEP would use the mailing address to notify the Applicant of program announcements.
12.-16.	<i>Contact Person Name, Contact Person Title, Contact Person Telephone Number, Contact Person Fax Number, Contact Person Email Address</i>	The person that MassDEP would contact about general information on the application. This person may be the same person as the Fleet Supervisor (see below).
Section B. Fleet Supervisor Information		
1.-4.	<i>Fleet Supervisor Name, Title, Telephone Number, Email Address</i>	The name, title, telephone number, and e-mail address of the fleet supervisor. This person is the contact for information on the Applicant's <u>fleet</u> and may be the same person as the Contact Person.
Section C. Certification		
	<i>Signature, Print Name, Title, Telephone Number, Email Address, Date (month, day, year)</i>	The official with authority to apply for grants on behalf of the company. This person must sign the application.

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Applicants seeking eTRUs do not need to provide information on the gross vehicle weight of their trailers (Question 7) and the operating territory of other states and Massachusetts municipalities they service (Questions 8 and 9 respectively).

Section D. Vehicle/Trailer Description Worksheet		
Section	Field Name(s)	Explanation
Vehicle/Trailer #___ of ____		The number of the total vehicles/trailers applied for in the application. For example, if only 1 vehicle is being applied for, write "1 of 1". For two vehicles, write "1 of 2" on this worksheet page and "2 of 2" on the second worksheet (that you made a copy of), etc.
1.	Check the box that best describes your vehicle/trailer	Check the box of the type of vehicle/trailer for which you are requesting a technology or technologies. Only detached trailers with transportation refrigeration units that operate semi-permanently or permanently at a market, warehouse, or distribution center are eligible for eTRUs. Only long-haul trucks weighing 33,000 lbs. or more with sleeper berths are eligible for APUs.
2.	Vehicle/Trailer Unit #	The company-assigned unit identification number of the vehicle/trailer.
3.	Vehicle/Trailer Year, Make, & Model	The truck/trailer's year of manufacture, make and model. .
4.	Vehicle/Trailer Identification Number (VIN)	The vehicle identification number of the truck, or trailer if the trailer is manufactured after 1984 (trailers manufactured prior to 1984 have a manufacturer serial number).
5.	License/Registration Number	The license plate number of the vehicle or registration number of the trailer.
6.	State of Registration	The state where the truck/trailer is registered.
7.	Gross Vehicle Weight (GVW)	The gross vehicle weight of the vehicle. <u>This information is not required for trailers.</u>
8.	Operating Territory (Other States)	The state(s) other than Massachusetts to which the truck travels for delivery <u>destinations</u> . List all applicable states.
9.	Operating Territory (MA Cities and Towns)	The municipality(ies) in Massachusetts to which the truck travels for delivery <u>destinations</u> . List all applicable municipalities.
10.	Engine Serial Number (S/N)	The manufacturer-assigned serial number. This is usually found on the engine mounted plaque or tag.
11.	Engine Year, Make, & Model	The engine's year of manufacture, make and model.
12.	EPA Engine Family Number	The manufacturer-assigned engine family number. This is usually found on the engine mounted plaque or tag. The pre-qualified vendor can also help obtain this number.
13.	Engine Horsepower (hp)	The engine horsepower listed on the engine mounted plaque or tag.
14.	Retirement Date (Month/Yr)	The anticipated date that the truck/trailer will be permanently taken out of service. Vehicle/trailer owners must continue to own and use the technology and the vehicle/trailer on which the technology is installed for at least two years after the funded technology is installed.
15.	Annual Miles or Hours	The annual miles and/or hours the truck/trailer operates.
16.	MA Market(s), Warehouse(s), Distribution	The Massachusetts market(s), warehouse(s) and distribution center(s) serviced by the truck/trailer.

Section D. Vehicle/Trailer Description Worksheet		
Section	Field Name(s)	Explanation
	<i>Center(s) Serviced</i>	Include the name of the facility and the Massachusetts municipality in which it is located.

Page 2 of Application (continued):

Section E. Requested Technology		
Column	Column Name(s)	Explanation
1	<i>Requested Technology</i>	The technology or technologies you are requesting. Only Class 8, long-haul trucks may request more than one technology (an APU and a retrofit device).
2	<i>State Contracted Vendor</i>	The name of the vendor supplying the requested technology. The vendor must be one of the vendors under state contract with MassDEP.
3	<i>Technology Make</i>	The name of the manufacturer of the requested technology.
4	<i>Technology Model</i>	The model name or number of the requested technology.
5	<i>Estimated Cost (Purchase, Installation and Mileage) of Technology</i>	The estimated TOTAL cost of the technology, including the equipment cost, the labor charge and mileage, if applicable. Using estimates from the vendor assisting you with this application provide the projected costs for the requested technology. The vendor should estimate the equipment, installation, and, if applicable, mileage/travel costs associated with installing the requested technology. For example, a vendor quotes a figure of \$14,400 to purchase an eTRU and \$600 to install the eTRU on your TRU. You would write \$15,000 in this column (in the row for eTRUs).
6	<i>Your % Cost Share Requirement</i>	The required percentage cost share for you of each requested technology or technologies.
7	<i>Your Cost Share (Estimated Cost of Technology x Your % Cost Share Requirement)</i>	Multiply the <i>Estimated Cost of Technology</i> (Column 5) by <i>Your % Cost Share Requirement</i> (Column 6) to obtain <i>Your Cost Share</i> (Column 7). In the example of the \$15,000 eTRU, your cost share would be 25% or \$3,750. This would be the dollar amount you would be required to spend to obtain the technology. <u>You would pay the vendor directly for this amount.</u>
8	<i>Grant Funding Request (Estimated Cost – Your Cost Share)</i>	The amount of grant funding you are requesting from MassDEP. Subtract the dollar amount in Column 7 (<i>Your Cost Share</i>) from Column 5 (<i>Estimated Cost of Technology</i>) to obtain <i>Grant Funding Request</i> . This is the amount MassDEP would fund for the requested technology. In the example of the \$15,000 eTRU, the amount would be \$11,250 (\$15,000-\$3,750). MassDEP would provide this funding directly to the vendor.
TOTAL		Add up all the cells in Columns 5, 6 and 7 to get the overall TOTAL for each column.

Page 3 of Application:

Section F. Register for All Requested Technology (Columns 5, 7 and 8)

This section is required for all applicants.

Transfer the total amounts from the TOTAL of Columns 5, 7 and 8 in Section E onto the Register. Repeat for all vehicles/trailers for which you are requesting technology or technologies. Total up each column at the bottom of the Register. These three values are the budgetary information for the application.

If you are applying for technologies for more than 20 vehicles/trailers, make a copy of the Register and insert the same information from Section E.

Page 4 of Application:

Section G. Electric TRUs Only

If you are requesting an eTRU, please check off your answer to each question. These questions should be included with the application.

1.	<i>Electrical contractor assessment</i>	In order to receive an eTRU, applicants must provide required electrical infrastructure to support the requested eTRU(s). Applicants should indicate whether they have obtained an estimate from a licensed electrical contractor for the projected work, if applicable.
2.	<i>Electrical infrastructure required or upgrade to existing infrastructure</i>	Indicate whether the facility will require new electrical infrastructure or an upgrade.
3.	<i>Explanation of new or upgrades to electrical infrastructure to occur</i>	Explain in general terms the nature of the electrical infrastructure work to occur, if applicable.
4.	<i>Copy of electrical work estimate</i>	Attach a written copy of the licensed electrical contractor's estimate of the work to occur. Check the box to indicate it's attached.